Opiate Withdrawal  [30400563]

Height_____________________
Weight_____________________
Allergies____________________

METHADONE WILL NOT BE STARTED IN PATIENTS NOT ACTIVELY ENROLLED IN A METHADONE PROGRAM. SEE BELOW FOR MORE INFORMATION ON METHADONE FOR NARCOTIC ADDICTION. CONTACT THE CARE MANAGEMENT TEAM FOR FURTHER INFORMATION.

Franciscan Health System Hospitals (St. Joseph Medical Center, St. Francis, St. Clare, St. Elizabeth, St. Anthony Hospital, Highline Medical Center, and Harrison Medical Center) are NOT licensed as methadone detoxification or treatment facilities (i.e. narcotic treatment facility = NTF). Any physician who wishes to regularly dispense or administer methadone for the purpose of detoxification or maintenance of an addicted patient requires a separate license in addition to a controlled substance license. See Title 21, Code of Federal Regulations, Chapter 1300, section 823(g).

Outside a NTF, methadone may NOT be prescribed or administered to narcotic addicts not already receiving maintenance therapy for their addiction. During hospitalization only those patients actively enrolled in a methadone treatment clinic may be given their usual daily dosage by physician order from the hospital pharmacy. DEA rules allow a physician to also provide the drug to an addict awaiting admission to a NTF. However, the restrictions require a physician to personally administer, not just prescribe, daily methadone doses and the three day limit on this treatment makes this an unrealistic option given the extensive waiting times that are required for admission to an NTF.

Patient ACTIVELY Enrolled in Methadone Program
Consult to Care Management
[ ] Inpatient consult to Care Management Reason for Consult?
[ ] Inpatient consult to Social Work Reason for Consult?

Patient NOT Enrolled in Methadone Program

Opiate Withdrawal Management

[ ] Clonidine Oral or Patch Panel (Single Response)

( ) cloNIDine (CATAPRES) tablet

0.1-0.2 mg, Oral, Every 6 hours
Notify md if blood pressure is less than 100/60.
Routine

( ) cloNIDine (CATAPRES) patch 0.2 mg/24 hr

1 patch, TransDermal, for 7 Days, Weekly, Routine

[ ] temazepam (RESTORIL) capsule

15-30 mg, Oral, Nightly PRN, sleep, Routine

[ ] multivitamin with minerals (CENTRUM) tablet

1 tablet, Oral, Daily, Routine

Symptom Management

[ ] prochlorperazine (COMPAZINE) tablet

10 mg, Oral, Every 6 hours PRN, nausea, vomiting, Routine

[ ] dicyclomine (BENTYL) tablet 20 mg

20 mg, Oral, Every 6 hours PRN, abdominal cramping, Routine

[ ] bismuth subsalicylate (PEPTO-BISMOL) suspension

30 mL, Oral, As needed, diarrhea
Maximum 8 doses/day
Routine

Oral Medication for cramping or mild discomfort (Single Response)

( ) Baclofen Panel

"Followed by" Linked Panel

[] baclofen (LIORESAL) tablet

10 mg, Oral, 3 times daily, For 48 Hours
For muscle spasms and joint pain
Routine

Provider Initial:______________
Nicotine Replacement

Nicotine Replacement Therapy
Nicotine Replacement therapy will be avoided if possible in patient with unstable acute coronary syndrome for 72 hours. After 72 hours if chest pain, arrhythmias, and/or blood pressure have stabilized, Nicotine replacement may be considered at ONE STEP below the calculated replacement dose. NOTE: 1/2 pack = 10 cigarettes

The nicotine products listed below may be used as monotherapy or in combination therapy. Combination therapy should include a nicotine patch plus either nicotine gum or nicotine lozenges.

**Smoking History**  
**Recommended Starting Dose**

- **Step down therapy after initial nicotine Replacement for 6-7 weeks**

<table>
<thead>
<tr>
<th>Smoking History</th>
<th>Nicotine patch, 7mg</th>
</tr>
</thead>
<tbody>
<tr>
<td>10 Cigarettes per Day or less, past history of cardiovascular disease, or weight under 45 kg</td>
<td>Nicotine patch, 14 mg</td>
</tr>
<tr>
<td>Heavy smokers (More than 10 cigarettes/day)</td>
<td>Nicotine patch, 21 mg</td>
</tr>
<tr>
<td>Smokeless tobacco users, pipe smokers or at patient request</td>
<td>Nicotine Gum, 2mg</td>
</tr>
</tbody>
</table>

Note to provider: Insulin requirements may change - monitor blood sugars. Topical Steroids and oral antihistamines may be recommended to treat less severe skin irritations.

<table>
<thead>
<tr>
<th>No Smoking while on nicotine replacement therapy</th>
<th>Routine, Until discontinued, Starting today</th>
</tr>
</thead>
<tbody>
<tr>
<td>nicotine (NICODERM CQ) patch 7 mg</td>
<td>1 patch, TransDermal, for 24 Hours, Daily Change skin site daily and do not reuse for one week. Discontinue patch and notify prescriber if patient develops severe rash, chest pain, irregular heartbeat, palpitations, nausea, or vomiting. If severe rash develops, contact pharmacist with order to change to nicotine (Nicorette) gum. Routine</td>
</tr>
<tr>
<td>nicotine (NICODERM CQ) patch 14 mg/24 hr</td>
<td>1 patch, TransDermal, for 24 Hours, Daily Change skin site daily and do not reuse for one week. Discontinue patch and notify prescriber if patient develops severe rash, chest pain, irregular heartbeat, palpitations, nausea, or vomiting. If severe rash develops, contact pharmacist with order to change to nicotine (Nicorette) gum. Routine</td>
</tr>
<tr>
<td>Item</td>
<td>Description</td>
</tr>
<tr>
<td>------</td>
<td>-------------</td>
</tr>
<tr>
<td>[ ]</td>
<td>nicotine (NICODERM CQ) patch 21 mg/24 hr 1 patch, TransDermal, for 24 Hours, Daily Change skin site daily and do not reuse for one week. Discontinue patch and notify prescriber if patient develops severe rash, chest pain, irregular heartbeat, palpitations, nausea, or vomiting. If severe rash develops, contact pharmacist with order to change to nicotine (Nicorette) gum. Routine</td>
</tr>
<tr>
<td>[ ]</td>
<td>nicotine polacrilex (NICORETTE) gum 2 mg 2 mg, Buccal, As needed, smoking cessation Maximum = 24 pieces/24 hours Routine</td>
</tr>
</tbody>
</table>

Date:_______ Time:_______ Printed Name of Ordering Provider:_____________________________________________

Provider Signature:__________________________________________________________

Date:_______ Time:_______ RN Acknowledged: __________________________________________________________